

## **HUMAN SERVICES**

### **DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**

#### **Administration**

#### **Extension of Time for Filing Claims in Cases of Delayed SSI Determinations**

**Proposed Amendments:** N.J.A.C. 10:49-7.2.

**Authorized by:** James M. Davy, Commissioner,  
Department of Human Services.

**Authority:** N.J.S.A. 30:4D-1 et seq.

**Calendar Reference:** See Summary below for explanation of exception to  
calendar requirements.

**Agency Control Number:** 05-P-04.

**Proposal Number:** PRN 2005- .

Submit comments by June 17, 2005 to:

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The agency proposal follows:

## **Summary**

The Division proposes an amendment to N.J.A.C. 10:49-7.2, which contains timely filing requirements for Medicaid providers submitting claims for reimbursement. The proposed amendment would extend the filing deadline in cases in which such claims could not be filed in accordance with the existing requirements of N.J.A.C. 10:49-7.2 as a result of a delay in Federal Supplemental Security Income (SSI) eligibility determinations.

The SSI program provides monthly income to people who are age 65 or older, or are blind or disabled and have limited income and financial resources. The Social Security Administration (SSA) processes SSI applications and determines whether an individual is eligible for SSI. In New Jersey, if an individual qualifies for SSI, that individual is automatically determined eligible for Medicaid. Because the SSA can take as long as 18 months to make a determination, some providers are forced to file claims beyond the existing timely filing requirements of N.J.A.C. 10:49-7.2. Consequently, those late claims have been rejected by the Division's fiscal agent.

Proposed new N.J.A.C. 10:49-7.2(i) extends the time for filing Medicaid reimbursement claims in the cases described above, and also requires the Medicaid provider to assist the patient in completing and submitting an application for SSI so that the application is received by the SSA within the existing time requirements for claim submission contained in N.J.A.C. 10:49-7.2(a) through (h). Proposed new subsection (i) provides an extension of time for filing the reimbursement claim only if the SSI application is received by the SSA within the existing time requirements for claim submission contained in N.J.A.C. 10:49-7.2(a) through (h). The proposed new subsection requires, in such cases, that the

Medicaid provider file a reimbursement claim so that the claim is received by the Division's fiscal agent by the latest of the following:

1. Within the time requirements for claim submission as stated in the existing rule,  
or
2. Within six months from the date of the SSI eligibility determination, or
3. Within six months from the date the SSI/Medicaid eligibility data appears on the New Jersey Medicaid Management Information System.

The Department has determined that the comment period for this proposal will be 60 days; therefore, pursuant to N.J.A.C. 1:30-3.3(a)5, this proposal is exempt from the rulemaking calendar requirement.

### **Social Impact**

The proposed amendment would allow providers to receive reimbursement for claims that could not be filed timely under existing requirements because of delays by the SSA. The proposed amendment would allow beneficiaries to have their medical care paid for by Medicaid, once the beneficiaries have been determined eligible. These changes would protect the health and welfare of qualifying individuals who need to apply for an SSI eligibility determination in order to receive Medicaid benefits.

### **Economic Impact**

Individuals who need to apply for an SSI eligibility determination in order to receive Medicaid benefits will have their medical care paid for by Medicaid, if they are determined

eligible for SSI. This will reduce their financial burden. Providers who have served the beneficiaries while they are waiting to be determined eligible by the SSA will have their claims paid by Medicaid. The fiscal impact on the Division will be minimal, given the very small percentage of claims involved. The fiscal impact on the providers will be minimal, because hospitals already employ staff to review billing issues with patients. The same staff could assist with the SSI applications.

### **Federal Standards Statement**

Pursuant to Section 1902(a) of the Social Security Act, 42 U.S.C. § 1396a(a), New Jersey's Medicaid program provides services to individuals who meet the income and resources requirements of the (SSI) program.

The Division has reviewed the Federal statutory and regulatory requirements and has determined that the proposed amendments meet, and do not exceed, the applicable Federal standards. Therefore, a Federal standards analysis is not required.

### **Jobs Impact**

The Division does not anticipate that the proposed amendments will result in the creation or loss of jobs in the State of New Jersey.

### **Agriculture Industry Impact**

No impact on the agriculture industry in the State of New Jersey is expected to occur as a result of this rulemaking.

### **Regulatory Flexibility Statement**

The proposed amendments require hospitals to assist patients in completing and submitting applications for SSI. This assistance ultimately benefits the hospitals, who will then be able to bill the Division once the individuals become eligible for SSI and Medicaid. None of the hospital providers are small businesses, as the term is defined at N.J.S.A. 52:14B-17.

The assistance required should not create additional costs for the hospitals. A supply of applications may be obtained from the SSA. Hospitals already employ staff who gather patient information related to billing for services and these employees would be able to assist the patients in completing and submitting the applications to the SSA. The amendments creating an extension of time for providers to file certain reimbursement claims, as described in the summary above, will benefit the hospitals.

### **Smart Growth Impact**

The Department anticipates that the proposed rulemaking will have no impact on the achievement of smart growth in New Jersey or on the implementation of the State Development and Redevelopment Plan.

**Full text** of the proposal follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

## 10:49–7.2 Timeliness of Medicaid claim submission

(a) – (h) (No change.)

(i) If it appears that an individual is eligible for Supplemental Security Income (SSI), the Medicaid provider shall assist the patient in completing and submitting an application for SSI so that the application is received by the Social Security Administration (SSA) within the time requirements for claim submission contained in N.J.A.C 10:49-7.2(a) through (h). For institutional and non-institutional claims for services provided to individuals who were not Medicaid-eligible as of the date of service and who thereafter are determined to be eligible for SSI by the SSA, and therefore Medicaid-eligible, the following requirements shall apply:

1. If the individual's application for SSI is received by the SSA within the time requirements for claim submission contained in N.J.A.C 10:49-7.2(a) through (h), the Medicaid provider shall file a claim for services rendered to the individual which shall be received by the State's fiscal agent within the later of the following:

- i. The applicable time requirements for claim submission contained in N.J.A.C 10:49-7.2(a) through (h); or
- ii. Six months from the date of the SSI eligibility determination; or
- iii. Six months from the date the SSI/Medicaid eligibility data appears on the New Jersey Medicaid Management Information System.

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James M. Davy, Commissioner  
Department of Human Services

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Date